PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number 10/516728

CLAIMS AS FILED - PART I								SMALL E	YTITY	OR	OTHER SMALL	THAN ENTITY
(Column 1) (Column 2)										3		C117777
TOTAL CLAIMS					<u> </u>]	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NU	ABER EXTRA		BASIC FEE		OR	BASIC FEE	950
101	AL CHARGEA	BLE CLAIMS	9 minus 20 = .			•		X\$9=		OR	X \$ 18 =	_
INDEPENDENT CLAIMS			/ minus 3 = .					X \$ 44 =		OR	X \$ 88 =	
MUL	TIPLE DEPEN	DENT CLAIM P	RESENT ·					+ \$ 150 =		OR	+ \$ 300 =	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	950	
١	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	OTHER THAN . ENTITY OR SMALL ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 9	Minus	-3	0	8		X\$9=		OR	X \$ 18 =	
	independent	* f.	Minus	é	3	. <u> </u>		X \$ 44 =		OR	X\$88=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	7
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLABMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		2		X\$9=		OR	X \$ 18 =	
	Independent	•	Minus	***		a		X \$ 44 =		OR	X \$ 88 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =	
(Column 1) (Column 2) (Column 3)								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur HIGH	<u> </u>	(Column 3)				i 1		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE '	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	•	Minus	**		=		X \$ 9 =		OR	X\$18=	
	Independent	•	Mimus	***		8		X \$ 44 =		OR	X \$ 88 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 11/2004)

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